

APPENDIX 5

SUPPORT FOR PUPILS WITH MEDICAL CONDITIONS

Last review:	February 2025
Review date:	February 2026
Signed By:	
Approval Committee:	Governing Body



GILLINGHAM SCHOOL
Harding's Lane, Gillingham
Dorset SP8 4QP

GILLINGHAM SCHOOL

Policy for supporting pupils with medical conditions and managing medicines

This policy has been structured based upon the most recent government advice “Supporting pupils at school with medical conditions” (*DfE - December 2015*), the “Guidance and Code of Practice - First Aid at Work” provided by Dorset County Council, guidance from local Health Services, professional teaching associations and Dorset County Health and Safety Team.

Gillingham School adheres to the duty as stated in the Children and Families Act 2014 that pupils with medical conditions will have the same right of admission to our school as other pupils and will not be refused admission or excluded from school on medical grounds. Appropriate levels of assessments will be undertaken to establish and determine what support pupils with medical conditions require. This will be done in partnership with parents and health professionals.

The prime responsibility for a pupil's health rests with parents. It is anticipated that parents/carers will ensure that appropriate information is provided for the school that enables proficient management and a good understanding of their child's medical condition; this includes working in partnership in the management of any medicines administered at school.

Gillingham School takes advice and guidance from a range of sources, including the School Nurse, Paediatric Consultants, and other Health professionals in addition to the information provided by parents in the first instance. This enables us to manage support effectively and to minimise any disruption to learning.

Key Personnel

The designated person with overall responsibility to implement this policy is Sarah Turnbull, Deputy Headteacher. This person will also ensure that staff are appropriately aware of medical condition of children with whom they work and that any confidential information pertinent to the medical condition is entrusted to individual staff. The persons responsible for developing individual healthcare plans is Suzanne Culbertson, Karen Seldon, school nurse services and/or consultant. The Governor with responsibility to oversee the arrangements to support children at school with medical Mr Patrick Andrews

AIMS

The school is committed to assisting children and young people with long-term or complex medical conditions and working in partnership with their parents/carers.

Our aims are:

1. To ensure that pupils at school with short or long term medical conditions are properly supported so that they have full access to education, including off-site activities, residential visits and physical education.
2. To make arrangements for staff to ensure that they receive adequate and appropriate training for them to support children with medical needs.
3. To ensure that parents and children have confidence in the medical support arranged at school.
4. To work in partnership with Health Service colleagues.
5. To be fully compliant with the Equality Act 2010 and its duties.
6. To manage medicines within school in accordance with government and local advice.
7. To keep, maintain and monitor records as detailed in this policy.
8. To monitor Individual Healthcare Plans, in partnership with health professionals.
9. To ensure that the pupils in our school are safe and are able to attend school regularly with their medical condition.
10. To support pupils with complex medical conditions and/or long term medical needs in partnership with Health professionals and parents to enable their access to education.
11. To adhere to the statutory guidance contained in "Supporting pupils at school with medical conditions" (DfE – December 2015), and "Multi-Agency Guidance for the Management of Long Term Health Conditions for Children and Young People" (DSCB 2011)¹ as set out and agreed with the school's Governing Body.

THE GOVERNING BODY WILL:

- ensure that arrangements are in place to support children and young people with medical conditions and that support is tailored to individual medical needs;
- make arrangements for this policy to be published on the school website;
- review this policy annually;
- ensure that staff are identified to implement the policy from day to day;
- monitor the arrangements associated with Individual Healthcare Plans so that they are managed appropriately, reviewed and maintained in partnership with Health professionals;
- ensure that staff receive appropriate training enabling them to provide bespoke and purposeful support to pupils with medical needs and that the training is refreshed regularly;
- ensure that specific arrangements are made for the self-management of medicine where applicable and how this will be both monitored and managed by staff;
- oversee the school's management of medicines to ensure that Health & Safety standards are met and that parents have confidence in the school's ability to support their child's medical needs;
- ensure that insurance arrangements cover staff in carrying responsibility for medical procedures;
- have 'due regard' to the rights of pupils who are disabled as set out in the Equality Act 2010;
- ensure that appropriate arrangements are made to include pupils with medical conditions on off-site activities;
- ensure that parents/carers are aware of the school's complaints policy.

¹ This document will be refreshed in 2016 to align guidance with more recent Statutory Guidance issued by DfE and DoH.

INDIVIDUAL HEALTHCARE PLANS

Individual Healthcare Plans are necessary for pupils with fluctuating conditions; long term and complicated conditions; medical conditions requiring regular support and monitoring; and where there is high risk where medical intervention might be needed.

Individual Healthcare Plans will be developed for pupils with medical conditions in accordance with the advice contained in "Supporting pupils at school with medical conditions" (*DfE – December 2015*). Individual Healthcare Plans will set out the support that is needed so that the impact on school attendance, health, social well-being and learning is minimised. Not all conditions will require an Individual Healthcare Plan. In some cases the agreement request to administer medicines will be sufficient to cover short term conditions and treatment. The plan will include the name of the member of staff who is appropriately trained and providing the agreed support.

Gillingham School will use the recommended DfE Templates or develop their own versions in line with the advice provided by the DfE to capture relevant information that will enable an appropriate plan to be structured. The Templates cover a range of issues for which governors have responsibility. Health professionals will be involved in the development of Individual Healthcare Plans in addition to parents and pupils.

The Individual Healthcare Plans will be tailored to meet the needs of short term, long term and/or complex medical conditions. The plans will be kept under review by the SEN department and revised as required, or at least annually, to ensure that they reflect current medical needs (e.g., changes in medication). Individual Healthcare Plans will include details on emergency arrangements and these will be shared with all relevant staff, First Aiders and school office staff as applicable.

Where pupils have been issued with an Education and Health Care (EHC) Plan by the local authority, any Individual Healthcare Plan will be linked to, or become part of that EHC Plan.

Health care plans should take into account "knock-on" effects on cognitive and physical abilities, emotional state and behaviour trends. It will be recognised, within the health care plan, that some medicines may have side effects that could affect the learning process including symptoms like poor concentration and/or memory difficulties. Some health care plans may incorporate the need for "intimate care" which will require professional and sensitive administration. Staff members dealing with these students will be trained by health professionals. Student's healthcare plans are located in the medical room. Some students with long-term medical requirements may require full time supervision. In circumstances requiring this type of supervision, a team of teaching assistants will be trained to deal with the individual concerned.

ROLES AND RESPONSIBILITIES

Parents

Parents are asked to provide the school with sufficient and up-to-date information about their child's medical needs and medication using a **DfE - Template B** so that arrangements to manage their short or long-term medical conditions can be implemented in partnership.

Parents are asked to deliver medicine to school if it is not possible for this to be administered outside the school day. Medicine should be provided in the original container(s) ensuring that the medicine is in date and that it has been stored correctly. All medicines must be marked with the following information clearly indicated:

- the child's name on the medicine;
- when the medicine should be given;
- the prescribed dose and pharmacist's instruction, e.g., after meals.

Parents are asked to collect all medicines at the end of the summer term and provide in-date replacements at the start of the new academic year.

Parents are expected to notify the school immediately (in writing) of any changes or alteration to a prescription or recommended treatment so that adjustment can be made to Individual Healthcare Plans or previous agreement. It is important that the school is aware and informed by parents about other issues or symptoms their child may have experienced over night or before school; this is particularly important for asthma conditions.

Parents are expected to fully engage with the Individual Healthcare Plans in a timely and detailed manner.

It must be remembered that the prime responsibility for a child's health rests with parents/carers.

The Headteacher will ensure the following:

- that Governors are informed about the implementation and effectiveness of this policy;
- that arrangements are made with staff supporting pupils with medical conditions, and for any medicines required in delivering that support to be stored safely and in line with guidance provided by the local authority;
- suitable arrangements are agreed in partnership and liaison with parents/carers to support the medical needs of pupils;
- that appropriate training has been provided for staff that enables them to carry out agreed procedures;
- that staff will not be directed to administer medicines - they can choose to volunteer to do so if they so wish (all staff will be advised to refer to advice from their professional associations before volunteering to administer medicines);
- liaison with governors in the review of this policy at appropriate intervals, in line with local and national advice;
- that all staff and parents/carers are aware of this policy and the procedures for dealing with medical needs at Gillingham School;
- make arrangements through Mrs Turnbull, SEN department, Suzanne Culbertson to manage the following:
 - - prescription medicines in school;
 - prescription medicines on trips and outings, including school transport;
 - accurate record keeping when administering medicines;
 - the safe storage of medicines;
 - procedures for access to medicines during emergency situations;
 - adhering to risk management procedures involving medicines;
- that risk assessments and arrangements for off-site visits are checked and that governors are informed of any necessary details.

Mrs Turnbull, SEN department and Suzanne Culbertson will ensure the following:

- staff work in partnership with parents/carers to ensure the well-being of children and young people;
- that interruption to school attendance for medical reasons will be kept to a minimum;
- staff who have agreed to administer medicines will receive the appropriate training;
- adherence to Individual Healthcare Plans;
- all cultural and religious views, made known to the school in writing, will be respected;

STAFF TRAINING AND SUPPORT

Most medicines to be administered will not require professional training. However the school will ensure that staff supervising the administering of medicines will understand that accurate records are to be kept and are completed at the time of being administered.

Staff who maintain these records should be clear about what action to take (such as referring to the Designated Senior Person for Child Protection) if they become concerned about the welfare of an individual pupil. If child or young person is provided with an Individual Healthcare Plan, additional training must be given by a nominated Health professional or by other appropriate professional bodies, e.g. use of a nebuliser, using Epipens. Training received or cascaded from parents will not be accepted unless otherwise instructed by a health professional. **Record of Training Forms must be completed and maintained.**

(Also see “Multi-Agency Guidance for the Management of Long Term Health Conditions for Children and Young People” (*DSCB 2011*); section 3.3 and 3.4 including Chart E.)

REASONABLE ADJUSTMENTS

The school understands its duties under the Equality Act 2010 to make reasonable adjustments and enable children and young people to have equitable access to education. Children and young people with complex or significant medical needs will be included in activities for as much as their health permits.

MANAGING MEDICINES ON SCHOOL PREMISES AND ON OFF-SITE ACTIVITIES

We will ensure that:

- DCC guidance on First Aid is followed;
- records are maintained detailing an accurate history of the administering of medicines as far as possible – this will not include self-administering of over the counter medicines for older pupils for whom parents have requested permission using the DFE templates
- DfE Templates C and/or D (or an appropriate equivalent) will be used to log administering of medicines;
- suitable back-up systems are in place to cover administering of medicines in the event of staff absence;
- if there are any doubts or confusion about arrangements for administering medicines, staff must consult with the parents and Suzanne Culbertson;
- No child or young person under 16 will be given medicines or be permitted to self-medicate without their parents’ written request.

Gillingham School has a defibrillator that may be used in an emergency in accordance with the manufacturer’s instructions and in line with the DC’s Guidance and Code of Practice on Automated External Defibrillators (AEDs).

STORAGE OF MEDICINES

The school will adhere to the advice contained in “Guidance and Code of Practice - First Aid at Work” and local guidance provided by Dorset Council’s Health & Safety Team and the local authority’s Physical and Medical Needs Service.

The school will only store medicines and medical supplies that are in-date and labelled clearly with the pupil’s name, we must have written permission from a pupil’s parent/carer (DFE template B). Parents/carers must collect any expired medication/supplies or they will take by medical room staff to the pharmacy for safe disposal. Parents/carers will be notified when medical supplies are due to expire and it is their responsibility to supply the school with in-date replacements. All medications will be stored in the medical cupboard in the medical room, which is lockable - with the exception of insulin and diabetic hypo-kits, which will be stored in the medical room fridge, all clearly labelled with the pupil’s name. There is access to emergency auto-injectors and salbutamol inhalers at all times via the reception and in the unlocked cupboard in the medical room.

REFUSAL OR TOO UNWELL TO TAKE MEDICINES

If a child refuses to take medicine as prescribed and as requested by parents, the records (DfE Template C or D or appropriate equivalent) must state 'REFUSED' clearly and the parents/carers informed immediately. Children/young people will not be forced to receive medicine if they do not wish to do so.

If a child or young person is ill/injured and therefore unable to receive the agreed prescribed medication, the person designated to supervise the taking of medicine will consult with parents/carers immediately and advise the Headteacher of their actions. If the child vomits or has diarrhoea soon after receiving medication, parents must be contacted so that they can seek further medical advice.

SELF-MANAGEMENT OF MEDICINES

Where possible, medicines should be taken outside of school hours. Parents are asked to notify the school if their child is taking prescribed medicine in school and that they provide appropriate consent (DfE template B) which will include consent for their child to self-administer away from the medical room if appropriate. Most of the time, secondary school children are able to self-administer prescribed medicines following the instructions given by the pharmacy. It is therefore appropriate that most secondary aged pupils self-administer medicines, e.g., inhalers, auto injectors or insulin. The school will encourage those with long-term medical conditions to take responsibility for administering their own medication but continue to ask staff to supervise so that the **appropriate records can be completed for safeguarding purposes**. A child's individual health care plan will indicate the level of supervision that is appropriate in consultation with parents and healthcare professionals. Some children, as a result of SEND or where medical conditions have recently developed will need daily supervision by a nominated adult, normally a teaching assistant or Suzanne Culbertson. However, children with long-term conditions such as diabetes may require less regular supervision, especially where diabetic pumps are used. However, **some level of agreed supervision is necessary for safeguarding purposes and the level of this supervision will be determined and monitored on an individual basis**. Parents are asked to update the school (Suzanne Culbertson or Karen Seldon) if their child is not self-managing their condition adequately, or if their child's medical condition worsens, so that the level of supervision can be reviewed. It may be appropriate for pupils to self-administer with a trusted adult elsewhere in the school, for example with their tutor.

For both prescribed and non-prescribed medicines, pupils must only carry the amount/dosage required for a single day's usage.

Non-prescribed Medicines

Some pupils may carry 'over the counter medicines' (non-prescribed medicines) for their own use or self-administer prescribed medicines that are appropriate to carry. For example, adolescent girls may wish to carry a school day's supply of paracetamol with them to relieve period pains if necessary. Under no circumstance would the school administer aspirin, as along with all other non-prescribed medicines, we would require parents/carers to complete DfE template B.

Emergency Medicines

The school keeps emergency auto-injectors and salbutamol inhalers at the school reception and in the medical room; these are accessible at all times. Permission for administration has been sought by the school. In an emergency assume consent has been given to administer these medicines so that there is no delay in the pupil receiving the potentially lifesaving medicine.

Controlled Drugs

Controlled drugs are kept in a locked cupboard in reception. Accurate records will be kept of dosage given, date and time. Signatures of two competent staff are required when administering controlled medicines.

OFF-SITE ACTIVITIES/SCHOOL TRIPS

Marie Pont and Suzanne Culbertson to identify key students to trip organiser who will require an individual risk assessment. All other less serious medical information are shared with trip leaders prior to the trip.

All arrangements for medicines, including the storage of medicines, Individual Healthcare Plans and Risk Management programmes will apply for all off-site activities or school trips. A member of staff will be designated to ensure there are suitable off-site arrangements for storage and recording of the medicines when assessing any risks associated for the trip, particularly for those children and young people with long term or complex health conditions. All plans and risk assessments will be discussed with parents/carers in preparation for the activity in advance of the departure day and agreed with the Headteacher (and Governors).

All off-site activities will be evaluated in terms of proximity and accessibility to emergency services and any implications for those with short or long term medical conditions before receiving approval to go ahead from the Headteacher/Governors.

EMERGENCY PROCEDURES

Care is taken to ensure that all pupils are safe. The school has nine qualified first aiders.

Pupils with life threatening medical conditions or that require close monitoring/supervision will have Individual Healthcare Plans developed by Health professionals that provide contact details for emergency situations, e.g. anaphylaxis, diabetes or epilepsy.

All cases deemed 'complex' or 'serious' medical conditions have emergency contact details held in the school office, on Edulink and on SIMS.

Asthma can also be life threatening. Gillingham School will follow the "Guidance on the use of emergency salbutamol inhalers in schools" issued by the Department of Health (*September 2014*).

Pupils who are 'at risk' due to their medical condition hold a *Grab Pack* (collated information to pass to a doctor or ambulance crew in an emergency) that will accompany them at all times. The purpose of the pack is to provide emergency services with up to date information such as diagnosis of principle conditions, key personnel and medical contacts, medication taken, up to date records of medicines that have been administered together with other relevant medical information and an agreement with parents/carers about what to do in an emergency.

BEST PRACTICE

Gillingham School will endeavour to eliminate unacceptable situations by promoting best practice in supporting pupils with medical conditions. In doing so the School will:

- ensure that pupils have access to the medicine they need as arranged with parents;
- where necessary, manage each medical condition through an Individual Healthcare Plan;
- listen to the views of pupils and their parents and take advice from medical professionals in planning the support needed;
- ensure that pupils with medical conditions are supervised appropriately and not left alone when ill;
- support access to the full curriculum or as much as medical consultants recommend;
- work in partnership with health services to ensure swift recovery or access to treatment;
- facilitate opportunities to manage medical conditions with dignity;
- manage medical needs such that parents are not required to support their child in school;
- include all children in school on and off-site activities, meeting their medical needs in the best way possible.

LIABILITY AND INDEMNITY

Gillingham School is covered by the local authority's medical malpractice insurance policy. This covers all staff in the arrangements made to support pupils with medical conditions for whom particular training has been given. Staff must follow the guidance, procedures and administering of medicines accurately.

COMPLAINTS

Gillingham School holds a Complaints Policy details of which can be found on their website. Should any complaint be received in respect of the support provided for individual medical conditions, it will be dealt with in accordance with the Complaints Policy.

EQUALITY STATEMENT

Gillingham School is mindful of its Equality Duties; respecting religious belief and ensuring that support is provided for those with disability needs that might be affected by this policy. Where there are language or communication issues, and to avoid any misunderstanding, the parents/carers and Headteacher will agree an appropriate course of action. The Headteacher will engage interpreters or signers when required to ensure that full understanding of a pupil's medical needs are determined accurately.

With regard to off-site visits and residential opportunities, Gillingham School will ensure that reasonable adjustments enabling pupils to be included are appropriate and made in consultation with parents/carers.